2.3 The Western Front, 1916-17: The Somme and Passchendaele as Medical Context: 30-minute Pack

EDEXCEL 1HI0 · about 30 minutes

Total Marks

Name: _____ Date: ____ / ____ / _____

Answer ALL questions. Questions 2 and 3 refer to Source A and Source B. Write in full sentences for Questions 2, 3, 4 and 5. You are advised to spend about 30 minutes on this pack.

Source A and Source B: A Casualty Clearing Station During a Major Offensive, 1916

Source A and Source B were written for Revision Library as original, representative teaching material. Source A is an account in the style of a Royal Army Medical Corps medical officer's diary, written to represent the kind of first-hand experience described in verified historical accounts of Casualty Clearing Stations during the opening of the Battle of the Somme; it is not the testimony of a real, named individual, and no genuine wartime document has been reproduced or quoted. Source B is an illustrative log-style table styled on historical research into casualty flow during a major offensive; its figures are representative estimates for teaching purposes, not an authentic official record.

SOURCE A: from a diary written in the style of a Royal Army Medical Corps medical officer at a Casualty Clearing Station near the Somme, 1 July 1916.

Nothing prepared us for this morning. The barrage lifted a little after seven and within the hour the first ambulances were already coming down the road from the Advanced Dressing Stations, and by midday they had not stopped once. We have beds and tents for perhaps four hundred, and by evening we had taken in closer to a thousand, with more arriving every hour. Every surgeon in the station has been operating since noon without a proper break, and the orderlies are sorting the wounded on stretchers laid out across the grass outside because there is nowhere else to put them. The walking wounded, at least, can be sent on by train once their dressings are checked, which frees a little space, but the stretcher cases needing surgery are backing up faster than we can take them. We were told to expect heavy casualties today. I do not think anyone expected quite this many.

SOURCE B: an illustrative log showing the approximate number of wounded soldiers received at a single Casualty Clearing Station over four days during a major offensive.

Day of the offensive	Approximate wounded received that day	Note
Day 1	about 950	far above the station's planned capacity of around 400
Day 2	about 600	still well above planned capacity
Day 3	about 350	close to planned capacity
Day 4	about 200	flow easing as the advance slowed

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Note: these figures are illustrative estimates for teaching purposes, representing the kind of surge and gradual easing typically described in accounts of Casualty Clearing Stations during a major set-piece offensive, not the recorded totals of a genuine, named station.

1 Give two reasons why casualty numbers at Passchendaele put extra strain on the chain of evacuation.

(Total for Question 1 is 4 marks)

2 How useful is Source A for an enquiry into the pressure placed on Casualty Clearing Stations during a major offensive such as the Battle of the Somme? Explain your answer, using Source A and your own knowledge of the historical context.

(Total for Question 2 is 8 marks)

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3 How could you use Source A and Source B to find out about the pressure placed on the medical services during a major offensive on the Western Front? Explain your answer, using Source A, Source B and your own knowledge.

(Total for Question 3 is 8 marks)

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4 Source A suggests one possible line of enquiry into the strain placed on medical services during the Battle of the Somme. Complete the table to explain how you could follow this up.

(a) Detail in Source A that I would follow up: **(1)**

(b) Question I would ask: **(1)**

(c) What type of source I could use: **(1)**

(d) How this might help answer my question: **(1)**

(Total for Question 4 is 4 marks)

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5 Explain why the scale of a major offensive such as the Battle of the Somme created particular challenges for the medical services on the Western Front.

(Total for Question 5 is 8 marks)

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Mark scheme · 2.3 The Western Front, 1916-17: The Somme and Passchendaele as Medical Context: 30-minute Pack

Question 1

the mud and flooded ground made it far slower and more dangerous for stretcher-bearers to carry casualties back to the Regimental Aid Post and Advanced Dressing Station	**B2**
the battle continued over several months, so casualties arrived in continuous large numbers rather than a single surge, keeping every stage of the chain under prolonged pressure	**B2**

Answer: Mud slowed and endangered stretcher-bearing, and the months-long battle kept casualty numbers continuously high, unlike a single-day surge.

Question 2

Level 1 Makes a simple comment on the content of Source A, with little or no reference to its nature, origin or purpose, or to own knowledge.	**1-2**
Level 2 Describes the content of Source A and begins to comment on its value, with limited reference to its nature, origin, purpose or own knowledge.	**3-4**
Level 3 Analyses the content and the nature/origin/purpose of Source A, using own knowledge to support a developing judgement about how useful it is for the given enquiry.	**5-6**
Level 4 Analyses the content and the nature/origin/purpose of Source A in a well-supported and convincing way, using precise own knowledge to reach a sustained judgement about how useful it is for the given enquiry, considering its limitations.	**7-8**

Indicative content:

- Content: Source A shows a Casualty Clearing Station receiving far more wounded than it was designed for, with surgeons operating continuously and orderlies sorting stretcher cases outside for lack of space.
- Content: it shows the distinction between walking wounded, who could be moved on quickly by train, and stretcher cases needing surgery, who backed up faster than they could be treated.
- Nature/origin/purpose: as an account written to represent an RAMC medical officer's diary, it reflects the kind of first-hand testimony historians use, but because it is written for this pack rather than a genuine wartime diary, it cannot be used as direct primary evidence for a specific date, unit or CCS.
- Own knowledge: contextual knowledge of the true scale of casualties on 1 July 1916 (around 57,000, including around 19,000 killed) can be used to assess whether the account's description of being overwhelmed is consistent with verified historical evidence.
- A full answer weighs the source's plausible, typical content, consistent with verified historical knowledge of the Somme's opening days, against its limitations as illustrative rather than archival material, before reaching a judgement on its usefulness for the stated enquiry.

Question 3

Level 1 Makes a simple comment on the content of one source, with little or no reference to using the sources together or to own knowledge.	**1-2**
Level 2 Describes the content of both sources and suggests, in general terms, what each could be used to find out.	**3-4**
Level 3 Explains what Source A and Source B could each be used to find out, and begins to explain how they could be used together, supported by own knowledge.	**5-6**
Level 4 Explains clearly and convincingly what Source A and Source B could be used to find out both separately and together, supported throughout by precise own knowledge of the historical context.	**7-8**

Indicative content:

- Source A shows the lived, first-hand experience of a single medical officer coping with a sudden surge in casualties, which could be used to investigate how staff experienced the pressure at a Casualty Clearing Station.
- Source B shows the overall pattern of casualty numbers across several days, which could be used to investigate how the flow of wounded rose sharply then eased as an offensive continued.
- Used together, Source A's individual account and Source B's day-by-day figures could be used to investigate how far one officer's description of being overwhelmed on the first day matched the wider statistical pattern of a rapid surge followed by a gradual easing.
- Own knowledge could be used to check both sources against what is known about the true scale of casualties on 1 July 1916 and about how CCS capacity was planned and organised.
- A full answer explains what each source could be used to investigate, and how using them together allows a more complete enquiry than either source alone, while noting that both are illustrative rather than genuine archival material.

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Question 4

(a) a relevant detail identified, e.g. the Casualty Clearing Station received closer to a thousand wounded on 1 July 1916, against a planned capacity of around four hundred **B1**

(a) Answer: The Casualty Clearing Station received far more wounded on the first day than it had beds and tents for.

(b) a follow-up question that clearly relates to the chosen detail, e.g. how did Casualty Clearing Stations along the whole Somme front cope with the number of casualties on 1 July 1916 **B1**

(b) Answer: How did Casualty Clearing Stations across the whole Somme front cope with the number of casualties received on 1 July 1916?

(c) an appropriate type of source named, e.g. RAMC unit war diaries or official medical casualty returns from July 1916 **B1**

(c) Answer: RAMC unit war diaries and official medical casualty returns from July 1916.

(d) a clear explanation linking the source type to the question, e.g. official returns would record how many casualties each station actually treated, letting me compare stations and check how widespread the strain shown in Source A really was **B1**

(d) Answer: Official returns would record the actual numbers treated at different stations, letting me compare them and check how widespread the strain shown in Source A really was.

Question 5

Level 1 Identifies one or two general reasons why the scale of the battle mattered, with little or no supporting detail or explanation. **1-2**

Level 2 Identifies and begins to explain one reason, supported by accurate detail. **3-4**

Level 3 Explains two reasons why the scale of the offensive created particular medical challenges, each supported by accurate and relevant detail. **5-6**

Level 4 Explains two or more reasons in a well-developed, logically structured way, supported throughout by precise and accurate detail, showing how the reasons connect. **7-8**

Indicative content:

- The scale of casualties on 1 July 1916 (around 57,000, including around 19,000 killed) was far beyond anything the medical services had previously experienced in a single day, and Casualty Clearing Stations designed for a few hundred received far more.
- Heavy, sustained artillery bombardment produced very large numbers of complex shell and shrapnel wounds, which required surgery rather than simple first aid, adding pressure at the Casualty Clearing Station stage in particular.
- Advance planning, such as arranging extra Casualty Clearing Stations and moving supplies forward, showed the medical services anticipated heavy casualties, but the actual numbers still overwhelmed planned capacity, as shown by the fall from around 950 casualties on Day 1 of Source B's log to around 200 by Day 4.
- Delays in treatment caused by overwhelmed stations increased the risk of casualties dying from blood loss, shock or infection before they could be operated on, connecting the scale of the offensive directly to medical outcomes.
- Overall, the sheer number of casualties arriving in a short space of time, combined with the severity of shell-caused wounds, meant that even a well-organised chain of evacuation could be overwhelmed during a major set-piece battle.

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